

**VOLUNTEER APPLICATION  
DESOTO NATIONAL WILDLIFE REFUGE**

Instructions: Mark "X" in appropriate boxes and either print or type responses. If extra space is needed, use Item 13.

1. Name: (Last, First, Middle)

2. Birth date:

3. Telephone Number:

Email Address:

4. Street Address

5. City, State, and Zip Code

6. Which general volunteer work categories are you most interested in?

- |   |   |
|---|---|
| <input type="checkbox"/> Adopt-A-Prairie                  | <input type="checkbox"/> Museum Conservation Assistant            |
| <input type="checkbox"/> Adopt-A-Trail Program            | <input type="checkbox"/> Museum Curatorial Assistant              |
| <input type="checkbox"/> Aquatic Biology Surveys          | <input type="checkbox"/> Museum Internship                        |
| <input type="checkbox"/> Artist                           | <input type="checkbox"/> Museum Library Assistant                 |
| <input type="checkbox"/> Audio-Visual Program Coordinator | <input type="checkbox"/> Naturalist/Interpreter                   |
| <input type="checkbox"/> Carpentry Projects               | <input type="checkbox"/> Outdoor Recreation/Historical Internship |
| <input type="checkbox"/> Clerical Assistant               | <input type="checkbox"/> Photographer                             |
| <input type="checkbox"/> Computer Programming/Analysis    | <input type="checkbox"/> Public Use Assistant                     |
| <input type="checkbox"/> Education Specialist             | <input type="checkbox"/> Special Exhibits Assistant               |
| <input type="checkbox"/> Historical Research Project      | <input type="checkbox"/> Taxidermist                              |
| <input type="checkbox"/> Information Assistant            | <input type="checkbox"/> Teacher/Naturalist                       |
| <input type="checkbox"/> Insect Survey/Collections        | <input type="checkbox"/> Wildlife Censusing                       |
| <input type="checkbox"/> Literature Search                | <input type="checkbox"/> Writer/Editor                            |

7. What qualifications/skills/experience/education do you have that you would like to use in your volunteer work?

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Backpacking/Camping      | <input type="checkbox"/> Heavy Equipment Operation | <input type="checkbox"/> Supervision                      |
| <input type="checkbox"/> Biology/Botany           | <input type="checkbox"/> Wildlife Rehabilitation   | <input type="checkbox"/> Fishing                          |
| <input type="checkbox"/> Boat Operation           | <input type="checkbox"/> Naturalist                | <input type="checkbox"/> Hunting                          |
| <input type="checkbox"/> Secretarial              | <input type="checkbox"/> Electronics/AV Systems    | <input type="checkbox"/> Teaching, curriculum development |
| <input type="checkbox"/> Clerical/Office Machines | <input type="checkbox"/> Statistical Analysis      | <input type="checkbox"/> Working with People              |
| <input type="checkbox"/> Computer Programming     | <input type="checkbox"/> Wildlife Management       | <input type="checkbox"/> Drivers License                  |
| <input type="checkbox"/> Data Entry               | <input type="checkbox"/> Writing Publications      | <input type="checkbox"/> Other (Specify) _____            |
| <input type="checkbox"/> Drafting/Graphic         | <input type="checkbox"/> Photography               | _____   |
| <input type="checkbox"/> Music                    | <input type="checkbox"/> Public Speaking           | _____   |
| <input type="checkbox"/> First Aid Certificate    | <input type="checkbox"/> Research/Report Writing   |   |
| <input type="checkbox"/> Hand/Power Tools         | <input type="checkbox"/> Sign Language             |   |

8. Based on boxes checked in items 6 & 7, what *particular* type of volunteer work would you like to do? (Please describe any qualifications, skills, experience, or education that apply.)

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9. Have you volunteered before? ☐ Yes ☐ No If Yes, please briefly describe your volunteer experience.

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10: Name a DeSoto employee/volunteer, if any, whom you know.

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11. What are some of your objectives for working as a volunteer? \_\_\_\_\_

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12. Specify any physical limitations that may influence your volunteer work activities:

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13. Use this space for more details.

#### NOTICE TO VOLUNTEER

Volunteers are not considered to be Federal employees for any purposes other than tort claims and injury compensation. Volunteer service is not creditable for leave accrual or any other benefit. However, volunteer service is creditable work experience.

#### PRIVACY ACT STATEMENT

Following information is provided to comply with the Privacy Act (PL 93-579). 5 U.S.C. 301 and 7 CFR 260 authorize acceptance of the information requested on this form. The data will be used to contact applicants and to interview, screen, and select them for volunteer assignments. Furnishing this data is voluntary.

14. Signature (Sign in ink)

15. Date